This Form is for INTERNAL PTO E ONLY It does OT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: <u>09 471510</u>

| Total Fee Calculation | | | | | | | | | | |
|----------------------------|-----------------|-------------------|-----------------|--------------|------------|-------------|----------|-------------|--|--|
| • | Fee Code | Total # Claims | Number Extra | х | Fcc | Fcc | ŕ | Total | | |
| | Sm./Lg. | | | | Sm. Entity | Lg. Entity | - | | | |
| Basic Filing Fee | - 201/101 | | | | | 760,- | | TC001- | | |
| Total Claims >20 | 203/103 | 17 -20 - | | x | | <u> </u> | _ | Car | | |
| Independent Claims >3 | 202/102 | 3 .3 - | | x | | | <u>.</u> | | | |
| Mult. Dep Claim Present | 204/104 | | | | : | | - | | | |
| Surcharge | 205/105 | , | | | | 120- | • | 120- | | |
| English Translation | 139 | | | | | <u>100,</u> | • | 130. | | |
| TOTAL FEE CALCULA | TION | | | | • • | | | 890,- | | |
| Fees due upon filing th | ne application: | | | | | | | , | | |
| Total Filing Fees Due | = S | 840. | | _ | | | | | | |
| Less Filing Fees Subm. | ined - \$ | | | _ | | • | | | | |
| BALANCE DUE | = \$ | 890 |), — | . | | | | | | |
| Office of Initial Patent E | Examination | | | ٠ | | | • | | | |

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)





PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

| | | | LIICOLIV | CITOVCIII | bei 10, 1000 | _ | | | | | | | |
|--|----------------------|-----------------|---------------------------------|-----------------|---|-------------------|-------------------|------------------------|----------------------------|---------------------|-------------------------|--|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMAL TYPI | OR | OTHER THAN SMALL ENTITY | | | | |
| FOR N | | | NUMB | R FILED | NUMBER | EXTRA | RATE | FEE | 7 | RATE | FEE | | |
| BA | ASIC FEE | | | - | | | | 380.00 | OR | * | 760.00 | | |
| TOTAL CLAIMS // minus 20= * | | | | | | | X\$ 9= | = | OR | X\$18= | | | |
| INDEPENDENT CLAIMS 3 = * | | | | | | | X39= | : 1 | OR | X78= | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | +130= | = | OR | +260= | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | | OR | TOTAL | 760- | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMAL | SMALL ENTITY OR | | | OTHER THAN SMALL ENTITY | | |
| AMENDMENT A | | REM Al | AIMS AINING TER NDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| NDM | Total | * | | Minus | ** | = . | X\$ 9= | : | OR | X\$18= | | | |
| AME | Independent | * | N OF M | Minus | *** PENDENT CLAIM | = | X39= | | OR | X78= | | | |
| | FINST PRESE | INTAIL | DIN OF IMIC | JETIPLE DEI | PENDENT CLAIM | | +130= | : | OR | +260= | | | |
| | | (Cole | umn 1) | | (Column 0) | (Caluma 0) | TOTA ADDIT. FE | | OR | TOTAL ADDIT. FEE | · | | |
| AMENDMENT B | | CL REM AF | AIMS AINING TER IDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | * | | Minus | ** | = | X\$ 9= | | OR | X\$18= | | | |
| | Independent | * | | Minus | *** | = . | X39= | | OR | X78= | | | |
| | FIRST PRESE | NTATIC | ON OF MU | JLTIPLE DEF | PENDENT CLAIM | | | • | 1 1 | | | | |
| | | | | | | | +130= | | OR | +260= TOTAL | | | |
| | | | | | | | ADDIT. FE | | OR | ADDIT FEE | | | |
| - | | | umn 1) AIMS | | (Column 2) HIGHEST | (Column 3) | | | | | | | |
| ENT C | | REM. AF | AINING TER IDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| AMENDMENT | Total | * | | Minus | ** | = | X\$ 9= | | OR | X\$18= | | | |
| AME. | Independent | * | • | Minus | *** | = | X39= | | | X78= | | | |
| | FIRST PRESE | NTATIC | N OF MU | JLTIPLE DEF | PENDENT CLAIM | | 1.002 | | OR | 7 0 | · · · · | | |
| * 1 | f the entry in colur | nn 1 is le | ess than th | e entry in colu | mn 2, write "0" in co | lumn 3. | +130= TOTA | | OR | +260= | · | | |
| ** | f the "Highest Nur | nber Pre | viously Pa | id For" IN THIS | S SPACE is less tha S SPACE is less tha | n 20. enter "20." | ADDIT. FEI | | OR A | TOTAL ADDIT. FEE | . " | | |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

*U.S. Government Printing Office: 1999 — 459-072/19142